

SUFFOLK COUNTY DEPARTMENT OF CIVIL SERVICE
NAME CHANGE REQUEST FORM

RETURN TO: Suffolk County Department of Civil Service
North County Complex, Bldg 158
P.O. Box 6100
Hauppauge, NY 11788

Please change my name in your records as indicated below (Please Print):

FROM: CURRENT NAME

TO: NEW NAME

SOCIAL SECURITY NUMBER: _____

I understand that this name change will affect all Department of Civil Service records including eligible lists and employment records. I further understand that, if I am currently employed by one or more agencies under the authority of the Suffolk County Department of Civil Service, all agencies will be notified of the name change to assure consistency of records.

SIGNATURE
DATE